

MINUTES

Utah Department of Health Pharmacy and Therapeutics Committee

Thursday, April 20, 2017 7:15 a.m. to 8:45 a.m. Cannon Health Building Room 128

Committee Members Present:

Abril Atherton, PharmD Clayton Grace, RPh Jake Jones, MD Bryan Larson, PharmD Jameson Rice, PharmD Clinton Sheffield, MD Susan Siegfreid, MD Keith Tolman, MD Elizabeth Young, PharmD

Committee Members Excused:

Dept. of Health/Div. of Health Care Financing Staff Present:

Merelynn Berrett, RN
Heather Santacruz, RN
Alyssa Pitts, RN
Andrea Rico, CPhT
Robyn Seely, PharmD

University of Utah Drug Regimen Review Center Staff Present:

Elena Martinez Alonzo, B.Pharm, MSPH (Tropical Medicine), Medical Writer

Other Individuals Present:

Joanita Lake, U of U
Michelle Bice, Gilead
Stuart O'Brochta, Gilead
Robert Nohavec, U of U
David Putelo, ViiV
Keri Smith, ViiV
Douglas L. Smith, Intermountain Healthcare
Charissa Anne, J & J
Christine Jamjian, U of U
Harry Rosado, U of U
Jahidur Rashid, U of U

Eman Biltaji, U of U
Stephen Esker, BMS
Stuart Pappas, Janssen
Jaren Hafen, Utah AIDS Foundation
Jennifer Lauper, BMS
Gary Okano, BMS
Alex Bitting, Bioverativ
Jason Russell, Bioverativ
Kelvin Yamashito. Sanofi Genzyme
Keaton Crockett, U of U

Meeting conducted by: Clinton Sheffield, MD

- 1. **Welcome & Housekeeping:** Clinton Sheffield, MD opened the meeting and reminded everyone to sign the rosters.
- 2. **Review and Approval of March Minutes:** Keith Tolman made a motion to Approve the minutes from March. Clinton Sheffield seconded the motion. All in favor, motion passed (Jake Jones and Jameson Rice were not present during this portion of the meeting,

- so they did not vote on this motion).
- 3. **HIV:** Elena Martinez Alonzo presented a review of HIV Nucleotide Reverse Transcriptase Inhibitors and Combination Products. She presented peer-reviewed research regarding the safety and efficacy of each agent, clinical trials, disease-state treatment guidelines and Utah Medicaid utilization data.

4. Public Comment:

- a. Harry Rosado stated he supports the inclusion of all of the medications discussed today because these medications save lives. Patient population is aging, and there are several co-morbidities, as well as pregnant women with HIV. HIV medications are lifelong therapy and clinicians may need to use different regimens in the event a patient fails a therapy, and to reduce resistance.
- b. Beth Young clarified that Abacavir/lamivudine/zidovudine (Trizivir) should be non-preferred.
- c. David Putelo spoke on behalf of Diptesh Patel from ViiV advocating for the continuation of coverage and open access for all HIV medications for Medicaid recipients in the state of Utah, stating that the PDL should reflect the clinical needs of its members.
- d. Stephen Esker, on behalf of BMS, stated they also believe in the continued open access to ARV's to allow HIV clinicians to individualize therapy based on a patient's needs.
- e. Stuart O'Brochta on behalf of Gilead reiterated open access for patient individuality in the treatment of HIV.
- f. Jaren Hafen from the Utah AIDS Foundation strongly encouraged Utah Medicaid not to restrict access to single tablet regimens for antiretroviral medications by placing them on the non-preferred drug list. Adherence to antiretroviral therapy is important for achieving optimal clinical outcomes in individuals with HIV.
- 5. **Other State Report:** Bryan Larson reported PDL listings for agents in this class in other States' Medicaid programs.

6. Committee Discussion:

- a. Clinton Sheffield made a motion that didanosine, stavudine and the combination of abacavir/lamivudine/zidovudine be non-preferred on the PDL. Bryan Larson seconded the motion. Unanimous approval (Beth Young was not present during this portion of the meeting, so she did not vote on this motion).
- b. Bryan Larson made a motion that at least one NRTI agent used in children and pregnant women be preferred on the PDL. Jake Jones seconded the motion. Unanimous approval (Beth Young was not present during this portion of the meeting, so she did not vote on this motion).
- c. Bryan Larson made a motion that for NRTIs, those agents recommended by the most current DHHS HIV guidelines should be preferred on the PDL. Keith Tolman seconded the motion. Unanimous approval (Beth Young was not present during this portion of the meeting, so she did not vote on this motion).
- d. Keith Tolman made a motion that for HIV Combination Products, those agents recommended by the most current DHHS HIV guidelines should be preferred on the PDL. Clinton Sheffield seconded the motion. Unanimous approval (Beth

- Young was not present during this portion of the meeting, so she did not vote on this motion).
- e. Susan Siegfreid made a motion that for NRTIs, a grandfathering clause with a look back of 90 days be incorporated into the PDL. Bryan Larson seconded the motion. Unanimous approval (Beth Young was not present during this portion of the meeting, so she did not vote on this motion).
- f. Susan Siegfreid made a motion that for HIV Combination Products, a grandfathering clause with a look back of 90 days be incorporated into the PDL. Keith Tolman seconded the motion. Unanimous approval (Beth Young was not present during this portion of the meeting, so she did not vote on this motion).
- 7. **Public Meeting Adjourned:** Clinton Sheffield adjourned the meeting.
- 8. **Next meeting scheduled for** May 18, 2017 Anti-Gout Agents including Allopurinol, Colchicine, Colchicine & Probenecid, Febuxostat, Lesinurad.

Audio recording of all P&T meetings are available online at: https://medicaid.utah.gov/pharmacy/pt-committee?p=Committee%20Meeting%20Audio%20Recordings